OCT 1 5 2007

PTO/SB/21 (10-07)

1 5 200 8	U.S.	Approved for use through 10/31/2007. OMB 0651-0031 Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE									
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TRANSMITTAL	Filing Date	07/12/2000									
FORM	First Named Inventor	Shankar Sahai									
	Art Unit	2152									
(to be used for all correspondence after initial filing)	Examiner Name	Victor D. Lesniewski									
Total Number of Pages in This Submission 20	Attorney Docket Number	630-015									
ENCLOSURES (Check all that apply)											
X Fee Transmittal Form	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence of Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CI	Address Status Letter X									
Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	OF APPLICANT, ATTO	RNEY, OR AGENT									
Firm Name Ward & Offvo		1									
Signature Printed name Date Date Printed name Dog H. Shallenburger	Math.	Reg. No. 37,937									
	FICATE OF TRANSMISS	t									
sufficient postage as first class mail in an envelope the date shown below:		O or deposited with the United States Postal Service with r Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on									
Signature	en										
Typed or printed name Vadim B. Gedzberg		Date 12/12/21									

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (10-07)
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PADE Elective on 12/08/2004						e if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number		09/614,867					
FEE TRANSMITTAL			Filing Date		07/12/2000					
For FY 2008			First Named Inventor		Shankar Sahai					
Applicant claims small entity status. See 37 CFR 1.27			Examiner Name Vie		/ictor D. Lesniewski					
					2152					
TOTAL AMOUNT OF PAYMENT (\$) 405				Attorney Docket No. 630-01						
METHOD OF PAYMENT (check all that apply)										
✓ Check Credit Card Money Order Other (please identify):										
Deposit Account Deposit Account Number: 23-0420 Deposit Account Name: Ward & Olivo										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee										
Charge any additional fee(s) or underpayments of fee(s)										
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card										
information and authorization on PTO-2038.										
FEE CALCULATION										
1. BASIC FILING, SE	•			OU FFF		UNIATION	FFFO			
	FILING F S	mall Entity	SEAR	CH FEES Small Entity	EXAM	INATION Small E	ntity			
Application Type	Fee (\$)	Fee (\$)	Fee (\$		Fee	\$) <u>Fee (</u>		ees Paid (\$)		
Utility	310	155	510	255	210	105				
Design	210	105	100	50	130	65				
Plant	210	105	310	155	160	80)			
Reissue	310	155	510	255	620	310)			
Provisional	210	105	0	0	0	0	. —			
2. EXCESS CLAIM F	EES					Fe	444	Entity (\$)		
Fee Description Each claim over 20 (including Reissues)								25		
Each independent claim over 3 (including Reissues)								05		
Multiple dependen						_		85 ·		
Total Claims							Multiple Dependent Claims Fee (\$) Fee Paid (\$)			
18 - 20 or HP HP = highest number of to		xx r, if greater than 20.	_=			<u>Fe</u>	<u>18 (\$) F6</u>	ee Paid (\$)		
Indep. Claims	Extra Clain	_		Paid (\$)						
3 - 3 or HP =		X	_ = han 3							
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
100 = / 50 = (round up to a whole number) x =										
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)										
Other (e.g., late filing surcharge): Request for continued examination fee 405										
SUBMITTED BY Registration No. (Attorney/Agent) 37,937 Telephone 908-277-3333										
							Telephone 908-277-3333			
Name (Print/Tyne)	Shallanhurgar "					17	Date 10//	2.10'l		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.